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1	under the Paperwork Reduction Act of 1995, no persons are required to respon	d to a collection of information unless	it displays a valid OMB control number.	_
	CONTINUED PROSECUT	TON APPLICATION (C	PA) BOXSI	4
	/ %\ REQUEST TI	RANSMITTAL 🐪 🖔		
		duplicate for the processing	CHECK BOX if applicable DUPLICATE	e:
İ	(Only for Continuation or Divisional	applications under 1 (4 § 1.550)	DOPLICATE	<u> L</u>
	RADEMARK	Attorney Docker Jo.	1488.1040000/EKS/AJK	<u>/</u> /
	Address to:	First Named Smentor	Jing-Shan HU 7/7	14
	Assistant Commissioner for Patents Box CPA	Examiner Name	Saoud, C.	<i>1</i> /
	Washington, DC 20231	Group/Art Unit	1801	
		Express Mail Label No.		
				$\neg$
	This is a request for a  continuation or  division (continued prosecution application (CPA)) of the prior app			
	filed on June 6, 1995 entitled: Polynucleotides Enco	ding Vascular Endothelial G	rowth Factor 3 Polypeptides ar	<u>nd</u>
	Methods for Producing the Polypeptides (As Amended).			
		NOTES		
	FILING QUALIFICATIONS: The prior application iden		isional application that is	
	either: (1) complete as defined by 37 CFR § 1.51(b) or (2) the 35 U.S.C. 371. A Notice will be placed on a patent issuing from	national stage of an international a	pplication in compliance with	
	issued on a CPA and is subject to the twenty-year term provisi  CPA may have been filed before, on or after June 8, 1995.	ons of 35 U.S.C. § 154(a)(2). Therefo	ore, the prior application of a	
	C-I-P NOT PERMITTED: A continuation-in-part application of under 37 CFR § 1.53(b).	cannot be filed as a CPA under 37 CF	R § 1.53(d), but must be filed	
	EXPRESS ABANDONMENT OF PRIOR APPLICATION: The application as of the filing date of the request for a CPA. 37	e filing of this CPA is a request to CFR § 1.53(b) must be used to file a	expressly abandon the prior continuation, divisional, or	
	continuation-in-part of an application that is not to be abando	oned.		
	ACCESS TO PRIOR APPLICATION: The filing of this CPA application under 35 U.S.C. 122 to the extent that any member	will be construed to include a wa of the public who is entitled under th	iver of confidentiality by the brovisions of 37 CFR § 1.14	
	to access to, copies of, or information concerning, the prior information concerning, the other application or applications	application may be given similar ac	ccess to, copies of, or similar	
	35 U.S.C. 120 STATEMENT: In a CPA, no reference to the prio none should be submitted. If a sentence referencing the prior of	r application is needed in the first ser	ntence of the specification and	
	is the specific reference required by 35 U.S.C. 120 and to every request, 37 CFR § 1.78(a).			-
ia i	PHILSON 0000036 DAW:190036 08469641			
	1. 264 194 tell the unentered amendment previously filed nonprovisional application.	onund	ler 37 CFR § 1.116 in the price	or
	2. A preliminary amendment is enclosed.			
	3. This application is filed by fewer than all the inventors i	named in the prior application	n, 37 CFR § 1.53(d)(4).	
	a. DELETE the following inventor(s) name	ed in the prior nonprovisiona	l application:	
	b. The inventor(s) to be deleted are set forth			
	b. The inventor(s) to be deleted are set forth	i ili a separaw siloci atiaciloa	HOIVEU.	

/23/1998   FC:103	NILSON 1. 26	00000036 i 4199 (64 th nonprov	ORE: 190036 08469641 e unentered amendment previously filed onunder 37 CFR § 1.116 in the prior isional application.
	2. 🛛	A prelin	ninary amendment is enclosed.
	3. This	application	on is filed by fewer than all the inventors named in the prior application, 37 CFR § 1.53(d)(4).
		a. 🔲	<b>DELETE</b> the following inventor(s) named in the prior nonprovisional application:
		b. 🔲	The inventor(s) to be deleted are set forth in a separate sheet attached hereto.
	4. 🔲	A new p	ower of attorney or authorization of agent (PTO/SB/81) is enclosed.
	5. Infor	mation D	isclosure Statement (IDS) is enclosed:
3/16/1998   FC:131	MPEOPLES	6000018 b. 🔲	PHORIM49 790,00 np Copies of IDS citations

[Page 1 of 2]

Burden Hour Statement: this form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box CPA, Washington, DC 20231. DC 20231.

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CLAIMS	(1) FOR		(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS	
	TOTAL C	LAIMS 1.16(c) or (j))	33-20* =	13	x \$ 22.00 =	\$ 286.00	
		NDENT CLAIMS § 1.16(b) or (i))	3.3**=	0	x \$ 82.00 =	\$ 00.00	
	MULTIPI	MULTIPLE DEPENDENT CLAIMS (if applicable) (37 CFR § 1.16(d))				\$ 00.00	
						\$ 790.00	
				Total of above Calculations =		\$1076.00	
	Reduction	by 50% for filing by sma	ll entity (Note 37 CFR §§ 1.9,	1.27, 1.28).			
		ue claims in excess of 20 ue independent claims or	and over original patent. ver original patent.	TOTAL =		\$1076.00	
5.	Small enti	Small entity status:					
	a. A small entity statement is enclosed, if (b) and (c) do not apply.						
		b. A small entity statement was filed in the prior nonprovisional application and such status is still proper and desired.					
	c. 🔲 Is	s no longer claim	ed.				
7.		The Commissioner is hereby authorized to credit overpayments or charge deficiencies in the following fees to Deposit Account No. 19-0036:					
	a. 🛛 F	Fees required under 37 CFR § 1.16.					
	b. 🛭 F	Fees required under 37 CFR § 1.17.					
	c. 🔲 F	Fees required under 37 CFR § 1.18.					
3. 🛛	A check in	n the amount of \$	790,00 to cover th	ne filing fee is enclose	×d.		
9. 🛛			Extension of Time for he fee for a 3-month	or the Parent Applica extension of time.	tion, and a chec	k in the amount of	
$\boxtimes$	Other: 5	Sequence Listing	with identical paper	copy and computer r	eadable copy.		
NOTE:			tion's correspondent ace address is provid	ce address will carry led below.	over to this CP	A UNLESS a	
			10. NEW CORRES	SPONDENCE ADDR	EESS		
Custon	mer Number o	or Bar Code Label	(Insert Custa code label her	omer No. or Attach bar re)	or 🛭 New corresp	pondence address below	
		STERNE, KESSLER, C	OLDSTEIN & FOX P.L.L.C.				
Vame ————		Attorneys at Law					
		1100 New York Avenue, N.W.					

11. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED		
Name (Print/Type)	Eric K. Steffe	
Signature	Ert. All	
Registration No. (Attorney/Agent)	36,688	
Date	Mach 11,1998	

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Country

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U.S.A.

Zip Code

Fax

20005-3934

(202) 371-2540

Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 1997 **CLAIMS AS FILED - PART I SMALL ENTITY** OR SMALL ENTITY TYPE (Column 1) (Column 2) **FOR NUMBER FILED NUMBER EXTRA** RATE **FEE** RATE FEE 790.00 BASIC FEE 395.00 OR **TOTAL CLAIMS** minus 20 = x\$11=x\$22= OR INDEPENDENT CLAIMS minus 3 = x41 =x82 =OR MULTIPLE DEPENDENT CLAIM PRESENT +135= +270= OR If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL **TOTAL** OR **CLAIMS AS AMENDED - PART II OTHER THAN** (Column 1) (Column 2) (Column 3) **SMALL ENTITY** OR **SMALL ENTITY CLAIMS HIGHEST** ADDI-ADDI-REMAINING **PRESENT** ⋖ NUMBER RATE **TIONAL** RATE **TIONAL** AFTER PREVIOUSLY **EXTRA AMENDMENT** FEE FEE AMENDMENT PAID FOR Minus Total x\$22= x\$11== OR Independent Minus x41 =OR x82 =FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +135= +270= OR TOTAL TOTAL OR ADDIT. FEE ADDIT, FEE (Column 3) (Column 2) (Column 1) **CLAIMS** HIGHEST ADDI-ADDI-REMAINING **NUMBER PRESENT** RATE **TIONAL RATE** TIONAL **AFTER EXTRA** AMENDMENT **PREVIOUSLY** FEE **FEE** AMENDMENT PAID FOR Total Minus x\$11=OR x\$22=Independent Minus. x41 =OR x82= FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM OR +135= +270= **TOTAL** TOTAL OR ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) CLAIMS **HIGHEST** ADDI-ADDI-REMAINING **NUMBER PRESENT TIONAL** RATE TIONAL RATE **AFTER PREVIOUSLY EXTRA** AMENDMENT FEE FEE **AMENDMENT** PAID FOR Total Minus

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

Minus

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Independent